

Exhibit D

CLAIM FORM
Jacqueline Beebe v. V&J National Enterprises, LLC, et al.,
W.D.N.Y. Case No. 6:17-cv-6075-EAW-MWP

[Class Member Name]

[Address]

[Address]

[Address]

Hire Date:

Separation Date:

Total Workweeks (during relevant period):

\$[AMOUNT]

Settlement Allocation:

By completing and signing this Claim Form, I verify and affirm that I am or was employed by Defendants as a delivery driver during at least some portion of the time from June 21, 2010 through September 16, 2017. I hereby consent and agree to join the lawsuit entitled *Jacqueline Beebe v. V&J National Enterprises, LLC, et al.*, Case No. 6:17-cv-6075-EAW-MWP in order to receive \$[AMOUNT]. I agree to be bound by the terms of the Settlement Agreement that was filed with the court in the above referenced litigation on November 27, 2019. I verify that I read and understood the release contained in the Settlement Agreement and Settlement Notice, which releases and discharges claims against Defendants, I consent to join this action under the federal Fair Labor Standards Act, 29 U.S.C. § 216(b), and I hereby designate and authorize Plaintiff Jacqueline Beebe and Plaintiff's Counsel to represent me in the lawsuit and to make decisions on my behalf with respect to the settlement.

I declare under penalty of perjury that the foregoing information is true and correct.

Signature

Date

Print Name

Address

Telephone Number

City / State / Zip Code

**PLEASE CORRECT YOUR ADDRESS AND PROVIDE THE CLAIMS
ADMINISTRATOR WITH YOUR CURRENT ADDRESS IF YOU MOVE FROM THE
ADDRESS LISTED ABOVE**

**RETURN SIGNED CLAIM FORM TO [INSERT CLAIMS ADMINISTRATOR
CONTACT INFORMATION] FOR RECEIPT BY THE SETTLEMENT
ADMINISTRATOR BY NO LATER THAN [CLAIMS DEADLINE]**